STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation S.D. SEC. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077						
1. TITLE OF NEWSPAPER Yankton Por s.s.	Dollston	2. DATE 9-24-10				
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIS		NUAL SUBSCRIPTION				
6 day Mon-sat 308	PRICE					
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)						
5. COMPLETE MAILING ADDRESS OF THE HEADQUART	kton SD 5707	8-0056				
5. COMPLETE MAILING ADDRESS OF THE HEADQUART	ERS OR GENERAL BUSINESS	OFFICES OF THE				
PUBLISHER (Not printers) Same	v.					
6. FULL NAME OF PUBLISHER: Grave Word						
7. OWNER (If owned by a corporation, its name and address mu						
addresses of stockholders owning or holding 1 percent or more						
names and addresses of the individual owners must be given. I and address, as well as that of each individual must be given.	t owned by a partnership or other	unincorporated firm, its name				
FULL NAME	COMPLETE MAI	LING ADDRESS				
Y- 11/2 Mad: Tue 21	9 1.1.1.1 (1)	1.1 (1				
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHE	R SECURITY HOLDERS OWNI	NG OR HOLDING 1				
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, M						
state. If more space is needed, list on back of this form.						
First Dakota National Bank,	225 Cedar St. Ya	inkton SD 57078				
	AVERAGE NO. COPIES EACH	ACTUAL NO. COPIES				
9. EXTENT AND NATURE OF CIRCULATION	ISSUED PRECEDING 12	ISSUED NEAREST TO FILING DATE				
	MONTHS					
A.TOTAL NO. COPIES (Net Press Run)	8395	8436				
B.PAID AND/OR REQUESTED CIRCULATION1. Sales through dealers and carriers, street vendors and						
counter sales.	6672	6869				
2. Mail Subscription	0010	1000				
(Paid and or requested)	350	1194				
C.TOTAL PAID AND/OR REQUESTED CIRCULATION	0 - 10	0013				
(Sum of 9B1 and 9B2)	8022	8063				
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	2.50	250				
2. SAMPLES, COMPLIMENTARY AND OTHER FREE	250	400				
COPIES	60	(.0				
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	9771	8777				
F. COPIES NOT DISTRIBUTED	0352	03/3				
1. Office use, left over, unaccounted, spoiled after printing	63	63				
2. Return from News Agents						
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run	8395	8471				
Statement must be signed by Publisher Rusiness Mone		of a Notary Public				
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public I swear that the statements made by me are true, correct, and complete:						
National States of the States						
John INON FUBLISHER						
(Title)						
Sworn to before me this 15 day of October, 20 10						
State of South Dakota Swort to before the this 10 day of 00000, 20 10						
County of Yankton) Notary Public						
(Seal)	My commission expires:	17-2015				

UNITED STATES State POSTAL SERVICE (All Poriodi	ement of Ownership, Manage	ement, and Circulatic
POSTAL SERVICE (All Periodi	- Aprilogions Except Ki	equester Publications
Yankton Daily Press & Dake	2. Publication Number	3. Filing Date
	5 Number of leaves D. III	2009-24-10 ally 6. Annual Subscription Price
Daily Except Sunday 7. Complete Mailing Address of Known Office of Publication (Not	printer) (Street, city, county, state, and ZIP+4®)	120.99
319 Walat CL 111		Contact Person David Jeffco Telephone (Include area code)
8. Complete Mailing Address of Headquarters or General Business	s Office of Publisher (Not printer)	605-665-7811
Jankton Media Tuc 319 9. Full Names and Complete Mailing Address 319	Walnut Street 1)	
9. Full Names and Complete Mailing Addresses of Publisher, Edito Publisher (Name and complete mailing address)	or, and Managing Editor (Do not leave blank)	m SD 57078
Editor (Name and complete mailing address)	treet, Yankton SD 57	078
Kelly Hertz 319 Walnut	class 11 11 11 0	
	Street, Yankton SD	
10. Owned Do not leave blank. If the publication is owned by a corpor names and addresses of all stockholders owning or holding 1 percentages and addresses of the individual owners. If owned by a particular individual owner of the publication is owned by a particular individual owner.		
10. Owner Do not leave blank. If the publication is owned by a corporation and addresses of all stockholders.	Street, Yankton SI	57078
which if the publication is published by a popprofit	cent or more of the total amount of stock. If not own- tnership or other unincorporated firm, give its name	n immediately followed by the ed by a corporation, give the
Full Name	torganization, give its name and address.)	and address as well as those of
Yankton Media Inc	Complete Mailing Address	
Gara / Doidon Island	319 Walnut Street,	Yankton 50 57078
Gary / Deidre Wood Gary / Sue Stevenson Robert / Jennifer Hicks	Same	
sary isve stevenson	Same	
Robert / Jennifer Hicks	Same	
. Known Bondholders, Mortgagees, and Other Security Holders Ownin		
Other Securities. If none, check box	ng or	
III Name	Complete Mailing Address	
est Dakota National Bank		
Day N	225 Coder Street,	Yankton SD 57078
		and the second s
ax Status (For completion by nonprofit organizations authorized to manage the purpose, function, and nonprofit status of this organization and the	all at name of	
TO PUIDUSE, HIRCHON and non	in at Horiprofit rates) (Check one)	
Mas Not Changed During Preceding 12 Manual	exempt status for federal income tax purposes.	
The purpose, function, and nonprofit status of this organization and the Has Not Changed During Preceding 12 Months Has Changed During Preceding 12 Months Has Changed During Preceding 12 Months (Publisher must submit form 3526, September 2007 (Page 1 of 3 (Instructions Page 3)) PSN	exempt status for federal income tax purposes:	

13. Publication Title			14. Issue Date for Circulation Data Below		
Taukton Daily Press Dakotan 15. Extent and Nature of Circulation		Daily Press Dakotan	9-24-10		
15. Extent and	Nat	ure of Circulation	Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date	
a. Total Numbe	r of C	Copies (Net press run)	8395	8436	
b. Paid Circulation (By Mail and Outside the Mail)	(1)	Mailed Outside-County Paid Subscriptions Stated on PS Form 3541(Include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)	1318	1162	
	(2)	Mailed In-County Paid Subscriptions Stated on PS Form 3541 (Include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)	32	32	
	(3)	Paid Distribution Outside the Mails Including Sales Through Dealers and Carriers, Street Vendors, Counter Sales, and Other Paid Distribution Outside USPS®	6672	6869	
	(4)	Paid Distribution by Other Classes of Mail Through the USPS (e.g. First-Class Mail®)	82	0	
c. Total Paid Di	stribu	ition (Sum of 15b (1), (2), (3), and (4))	8022	8063	
d. Free or Nominal Rate Distribution (By Mail and Outside the Mail)	(1)	Free or Nominal Rate Outside-County Copies included on PS Form 3541	0	0	
	(2)	Free or Nominal Rate In-County Copies Included on PS Form 3541	0	Ð	
	(3)	Free or Nominal Rate Copies Mailed at Other Classes Through the USPS (e.g. First-Class Mail)	0	0	
	(4)	Free or Nominal Rate Distribution Outside the Mail (Carriers or other means)	0	0	
e. Total Free c	r No	minal Rate Distribution (Sum of 15d (1), (2), (3) and (4))			
f. Total Distrib	ution	(Sum of 15c and 15e)	8022	8063	
g. Copies not	Distri	buted (See Instructions to Publishers #4 (page #3))	373	373	
h. Total (Sum	of 15	f and g)	8395	8436	
i. Percent Pai (15c divided		15f times 100)	100%	100%	
If the p	ublica	atement of Ownership ation is a general publication, publication of this statement is required at the statement of this publication.	irod Will be existed	Publication not required.	
17. Signature and Title of Editor, Publisher, Business Manager, or Owner Publisher Publisher			9/29/10		

I certify that all information furnished on this form is true and complete. I understand that anyone who furnishes false or misleading information on this form or who omits material or information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including civil penalties).